

ANNUAL REPORT  
OF THE  
MANAGERS  
OF THE  
STATE LUNATIC ASYLUM.

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Made to the Legislature, January 31, 1845.

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ALBANY:

CARROLL AND COOK, PRINTERS TO THE ASSEMBLY.

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# OFFICERS OF THE ASYLUM.

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## MANAGERS.

THOMAS H. HUBBARD,	UTICA.
NICHOLAS DEVEREUX,	"
ALFRED MUNSON,	"
CHARLES B. COVENTRY,	"
CHARLES A. MANN,	"
JACOB SUTHERLAND,	GENEVA.
T. ROMEYN BECK,	ALBANY.
DAVID BUEL, JUNIOR,	TROY.
JAMES S. WADSWORTH,	GENESEEO.

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## RESIDENT OFFICERS.

AMARIAH BRIGHAM, M D., Superintendent and Physician.  
HORACE A. BUTTOLPH, M. D., Assistant Physician.  
CYRUS CHATFIELD, Steward.  
Mrs. CHATFIELD, Matron.

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EDMUND A. WETMORE, Treasurer, Utica.





## ANNUAL REPORT

Of the Managers of the State Lunatic Asylum, for  
the year ending November 30th, 1844.

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### TO THE LEGISLATURE.

The managers of the State Lunatic Asylum, respectfully submit  
the following

#### REPORT.

Five hundred and fifty one patients have been received into the Asylum since it was first opened for their admission on the 16th of January, 1843, a period of one year, ten and a half months.

Patients have been admitted from fifty-four of the fifty-nine organized counties of the State. Three hundred and twenty-nine of the patients, so admitted, have been supported by or chargeable to, counties or towns; and two hundred and twenty-two have been private patients, supported by their own property, or the aid of relatives or friends.

During the same period, two hundred and ninety-one patients have been discharged from the Asylum, of whom one hundred and eighty-five were discharged recovered; sixty-one improved; twenty-two unimproved, and twenty-three have died, leaving in the institution at the date of this report, two hundred and sixty.

The large number of patients received into the Asylum since it was first opened, is a gratifying evidence of the favorable regard in which it is held by the public, as well as a convincing proof of the necessity and propriety of establishing this munificent charity.

Under the successful management of its present able and experienced superintendent, we think we are authorized to say that the in-

stitution is conferring upon a numerous, but most unfortunate class of our fellow beings, all those benefits and blessings which were anticipated by its philanthropic friends, who early saw and felt the necessity for its establishment, and earnestly pressed it upon the attention and favorable regard of the Legislature, as one of the most needed and meritorious of public charities.

Indeed, we are not aware that so large a number of patients have in so short a period of time, been received into any similar institution in this country or Europe ; and it is believed that the ratio of recoveries, in proportion to the number of cases treated, contrasts favorably with the best public Asylums for the insane, that have as yet been founded.

We refer, with great satisfaction, to the annual report made to us by the superintendent, and herewith presented, for a particular statement of the operations and results of the Asylum during the last year.

From this it will be seen, that the large number of two hundred and seventy-five patients have been admitted during the last year, and two hundred and eleven discharged during the same period ; of whom one hundred and thirty-two were discharged recovered ; forty-seven improved ; sixteen unimproved, and sixteen died.

In looking at the results of the institution, thus far, it should not be forgotten that many of the patients, sent from the county houses by the superintendents of the poor, and many of the private patients, are of the worst class, from the care and charge of whom the superintendents and friends most desire to be relieved ; and although the Asylum has been crowded with inmates, during the greater part of the year, still the superintendent has not refused admittance to any patient sent by the public authorities.

The law, for organizing the Asylum, provides that the number, which each county in the State shall be entitled to send to the Asylum, shall be in proportion to the insane population of the county ; and it directs the assessors of each town and ward in the State, every year, to ascertain the number and names of all insane persons in their town or ward, and transmit a list of the same to the county clerk, who is to send the same to the treasurer of the Asylum.

The assessors seem, generally, to have overlooked this part of their duty, and we have not yet been able to obtain any data from which to as-



certain the number of patients to which each county, under the law, is entitled.

The financial operations of the institution will appear from the treasurer's report, which is also herewith presented.

We have expended, during the last year, the sum of \$2,438.40, for necessary fixtures, and in fitting and preparing the building for the accommodation of patients: \$1,500 of this amount, has been necessarily paid out of the unexpended balance of the moneys appropriated by the act of the 18th April, 1843, and the residue has been paid out of the current receipts of the Asylum. The expenditures under this head, have been necessarily increased beyond what we originally estimated would be required, by reason of receiving into the Asylum a larger number of patients than it was originally intended to accommodate.

Our expenditures for furniture, during the past year, were \$3,842.-36. This, added to what we had previously expended, as stated in our last report, makes our whole expenditure for furniture to this time, \$11,798.31.

By the act of the 7th of May, 1844, the sum of \$2,000 was appropriated for the purchase of furniture, which has been expended during the last year for that purpose. The residue of the last year's expenditure for furniture, has been paid out of the current receipts of the Asylum.

The original estimate of the cost of furniture for the present building, was \$16,076.88. — (Senate Doc. 1842, No. 20, page 46.)

The expenditure, under this head, has been kept within its present limits, by omitting to purchase some articles included in the original estimate, but which were not indispensable to the comfort of the inmates; and by availing ourselves of the labor of the patients, in making up most of the beds, mattresses, and bed clothing, belonging to the establishment. This has not only reduced the expenses for furniture, but, by furnishing useful employment to many of the patients, has been instrumental in their restoration to health and soundness of mind.

The large amount of money we have been obliged to expend for fixtures, and in fitting up the building, has compelled us to keep our

expenditures for furniture within the lowest limits, consistent with the comfort and convenience of the inmates. Some further appropriations for furniture will, doubtless, be needed hereafter.

The sum of \$1,200, appropriated by the act of the 7th May last, to purchase a piece of land lying westerly and adjoining the grounds in front of the building, has been expended for that purpose. This land constitutes an important and valuable addition to the grounds in front, which are to be laid out in walks, and planted with ornamental trees and shrubbery.

We have also expended, during the last year, \$1,032.06 for the improvement and fencing of the grounds, only \$800, of which has been derived from the appropriation, made by the act of the 7th of May last, and the residue has been paid from the current receipts of the institution. This expenditure has been chiefly made in the erection of fences in front, and contiguous to each of the wings of the present building, and which were much needed for the convenience and proper care of the patients.

But little progress has as yet been made in the laying out and improvement of the grounds in front of the Asylum. To enable us to carry out the plan formed for their improvement, it was necessary first to obtain the land before mentioned, the purchase of which was not perfected until the 21st of June last. The planting of ornamental trees and shrubbery, and the forming of walks and avenues through the grounds in front, will greatly add to the external beauty of the establishment, and render it a more desirable and delightful retreat for the insane, and in every point of view it is important that these improvements should be made as soon as funds, at the disposal of the managers, can properly be spared for the purpose. But a small number of trees, compared with the whole number required, have as yet been planted. The expense of at once improving, ornamenting and fencing the entire grounds in front, according to the plan intended, ultimately, to be perfected, will be greater than we have funds, at present at our disposal, which can, with a just regard to other more pressing and indispensable wants of the institution, be appropriated to that object.

By taking a longer time for the making of these improvements, than, in many points of view, is desirable, much of the labor of gra-



ding and levelling the surface of the ground, and of forming the walks and avenues, can be advantageously performed by the patients, thus affording them both employment and recreation, greatly conducive to their restoration to health, and their enjoyment while inmates of the Asylum.

The expense of enclosing the grounds with a suitable fence will be considerable, to defray which an appropriation from the treasury may hereafter be needed. They are now enclosed by the fence which was built before the farm was purchased by the State.

The receipts, for the board of patients, during the last year, have been adequate to the payment of all the current expenses of the Asylum. We reduced the charge for board of "the poor or any person in indigent circumstances, whose support is chargeable to a town or county," from \$2.50 to \$2 per week from 1st of February, 1844. We made this reduction with some apprehensions as to its result; but we are gratified in being able to say that our apprehensions of a deficit, in the income to meet expenses, have not been realized.

For the favorable result in this respect, much credit is due to the judicious and efficient management of the steward, upon whom devolves the duty of procuring the necessary supplies for the whole household.

The sum, as appears by the treasurer's report, actually received into the treasury, for the board and clothing of patients, during the year, is \$28,948.98. The sum charged for board alone, during the year, is \$28,224.65. The bills for board, some of which that are due still remain unpaid, are paid semi-annually on the first of August and February.

From the results of the last year, we feel fully warranted in expressing the opinion, that the current receipts, at the prices for board now charged, will equal the current expenses of the Asylum, for general support during the year ensuing.

The products of vegetables, milk and pork, from the farm, are beginning to constitute an important item in lessening the expenses of living; and we anticipate still increased productions from this source, from the system of manuring and culture, which has but just been commenced.

By the act, providing for the organization of the Asylum, it is enacted that "all purchases for the use of the Asylum shall be for cash, and not on credit, or time."

This provision of the law we have endeavored to have strictly adhered to. It is, practically, an economical provision, as it enables the steward, at all times, to purchase supplies at the lowest cash market price, and saves much time and perplexity in the settlement and adjustment of bills.

The regulations adopted, prescribing the mode of making purchases and disbursements for the use of the Asylum, have thus far insured fidelity, economy and strict accountability. One of the general regulations, for the government of the Asylum, prescribes that "no officer shall be directly or indirectly interested in a contract for the supply of any article for the use of the Asylum, nor shall he receive any present or gratuity from any person dealing with the Asylum, or from any patient or visitor, or from the friends of a patient."

All purchases are to be for cash, and duplicate bills, containing the items of the account, are made, on one of which the steward endorses an order on the treasurer to pay the bill, and on the other takes a receipt for the order so given on the treasurer. No payment is to be made by the treasurer, except on the order of the steward, endorsed on the bill, containing the items of the account, for the payment of which the order is drawn, nor unless the bill is endorsed "approved" by the superintendent.

For the purpose of enabling the steward to make purchases of small articles, as convenience may require, the treasurer is authorised to advance to him a sum, not exceeding at any time \$200. The items, for petty expenses, are entered in a pass book, kept by the steward, and vouchers taken for all sums exceeding one dollar. This account is to be settled monthly or oftener, (and before any more money can be advanced) with the treasurer, having been first examined and approved by the superintendent.

By this system all expenditures are necessarily subjected to the supervision of the superintendent, who can direct and control them as he may deem expedient. The bills, for board of patients, are made out by the steward, and handed to the treasurer for collection. All



payments of money due the institution, are to be made to the treasurer.

The treasurer furnishes a quarterly statement of his accounts, containing, under the appropriate heads of expenditure, the names of all persons to whom bills have been paid, and also the aggregate of moneys received into the treasury. These accounts are examined by the finance committee of the board of managers, and compared with the original vouchers, kept in the office of the treasurer.

By the act, passed May 7th, 1844, in relation to the Asylum, the sum of \$60,000 was appropriated for the erection of "two additional wings of brick for the accommodation of patients, to be connected with the wings of the present building; each of said wings not to exceed 250 feet in length, 38 feet in width, and three stories in height, exclusive of the basement; and also for the erection of two buildings of brick, to be connected with the said new wings, for hospitals, washing and ironing rooms, and shops for the use of said Asylum."

Before commencing the work, we were required to prepare plans, drafts and detailed estimates of the expense of the buildings, so authorised to be erected, and submit the same to the Commissioners of the Land-Office for their approval. As soon after the passage of the law, as was reasonably practicable, we caused the plans and estimates required, to be prepared, and submitted the same to the Commissioners of the Land-Office, and obtained their approval. The wings, according to the plan adopted, are to be 210 feet in length each, exclusive of a verandah of 15 feet at each end, and 38 feet in width. When these additions are completed, the entire establishment will furnish suitable and convenient accommodations and apartments for *five hundred* patients, with all the architectural arrangements that are needed for the most complete classification. It will be one of the largest Asylums for the insane in the United States; and an institution worthy of the State, and creditable to the character of our people for humane and benevolent efforts in the cause of suffering humanity.

On the 10th of June last we advertised, as required by law, for sealed proposals for doing the excavation and mason's work on the foundations, and for furnishing the brick and joists; and in July entered into contracts for the work and materials for which we had received proposals.

The contractors have commenced the foundations for both of the main wings, one of which is now raised to the height of the basement, with the exception of the water table, which yet remains to be laid, and the other is so far under way that we shall be able to commence the brick work early in the spring.

We shall, during the present winter, make such arrangements as will enable us to proceed with the work rapidly, during the next summer. A large quantity of brick, lime and sand, and other materials, will be delivered, during the winter, and we think we shall be able, without difficulty, to have all the buildings enclosed as early as the first of November next. As the additions are much needed, we shall complete them as rapidly as is practicable and consistent with good economy in the expenditure of the money appropriated for the purpose.

We have drawn from the treasury \$6,000 of the money appropriated for the erection of additional buildings, and expended in the work \$4,655.83, leaving in the hands of the treasurer of the Asylum, unexpended, on the 30th of November, of the building fund, \$1,344.17. A large proportion of the residue of the moneys, appropriated for building, will be wanted prior to the 1st of January, 1846. For the faithful expenditure of these moneys we are required, from time to time, to furnish vouchers, and account to the Comptroller.

All of which is respectfully submitted.

T. H. HUBBARD,  
NICHOLAS DEVEREUX.  
A. MUNSON,  
C. A. MANN,  
J. S. WADSWORTH,  
C. B. COVENTRY,  
T. ROMEYN BECK,  
DAVID BUEL, JUNIOR.



## TREASURER'S REPORT

### To the Managers of the State Lunatic Asylum.

The undersigned, Treasurer of said Asylum, respectfully submits the following statement of receipts and payments, during the year ending November 30th 1844, on account of the Asylum, exclusive of monies appropriated, by act of 7th May 1844, for the erection of additional buildings.

#### RECEIPTS.

Balance in the Treasury, Nov. 30, 1843, .....	\$490 11
Cash from State Treasurer, bal. of appropriation by act	
18th April, 1843, .....	1,500 00
do      do    for purchase of land, appropriation	
May, 7, 1844, .....	1,200 00
do      do    for improvem't and fencing grounds,	800 00
do      do    for purchase of furniture, .....	2,000 00
do      do    from salaries of resident officers	
and Treasurer, .....	3,775 00
do    Towns and counties for board and clothing of	
patients, .....	17,593 82
do    for board of private patients, supported by friends	
or their own property, .....	11,355 16
Balance debited to new account, .....	365 70
	<hr/>
	\$39,079 79
	<hr/>

#### PAYMENTS.

For fixtures, fitting and preparing the building for accom-	
modation of patients, .....	\$2,438 20
do furniture, .....	3,842 36
	<hr/>
Carried forward, .....	\$

Brought forward, .....	\$	
For purchase of land, .....	1,200	00
do for improvement of grounds and fencing, .....	1,032	06
do salaries of officers, .....	3,775	00
do attendants, assistants and labor, .....	\$5,907	89
do fuel and lights, (including extra fuel for part of next year,) .....	4,190	20
do medical supplies, .....	262	02
do provisions, household stores and other current expenses, .....	13,808	15
do repairs of building, .....	340	42
do advances for clothing purchased for patients, .....	2,215	45
do over paym'ts on account of board refunded .....	68	04
	—————	26,792 17
		<u>\$39,079 79</u>

All of which is respectfully submitted,

E. A. WETMORE, *Treasurer.*

*Utica, December 20, 1844.*



## SECOND ANNUAL REPORT

Of the Superintendent of the New-York State Lunatic Asylum at Utica, for the year ending November 30th, 1844.

*To the Managers of the Asylum.*

GENTLEMEN :

In compliance with the law of the State, the Superintendent of the Asylum submits to the Board of Managers his

### SECOND ANNUAL REPORT.

In recalling the events of the past year, we feel devout gratitude to God, for his kind care of the institution and of its numerous occupants.

The year has been one of great prosperity. A large number of patients have been admitted, many of whom have recovered and been restored to their friends and to usefulness. But little sickness of any kind has prevailed, and but few deaths have occurred.

At the beginning of the year the number of patients at the Asylum, was

		Men.	Women.
	196	101	95
Admitted during the year, .....	275	132	143
Total number in the course of the year,	471	233	238

Of this number there have been—

		Men.	Women.
Discharged, recovered, -----	132	61	71
do improved, -----	47	26	21
do unimproved, -----	16	8	8
do dead, -----	16	7	9
Total discharged during the year, ....	211	102	109
Remaining at Asylum, Nov. 30, 1844,	260	131	129

In order to a correct understanding of these results it may be proper to explain what we mean by *recovered* and *improved*. By recovered we generally mean the complete restoration of the mental powers. Most of those thus classed, when they left us, appeared not only to be sane, but to possess as active and vigorous minds as before they were insane. But some few, though called recovered, and so considered by their friends, appeared some eccentric or dull. They were not insane, and yet they could hardly be said to have sound and vigorous minds. For the most part we find on inquiry they never had. Such individuals, after having had an attack of insanity and been at an Asylum for the insane and recovered, are ever after considered mentally deranged though they are not in fact more so than they were previous to the attack.

In some instances, though we are surprised at their rarity, the disease itself seems to have so impaired the physical system that the mind never fully regains its former power and activity, though the individuals become perfectly sane. On the contrary the minds of some are actually improved by an attack of insanity. We have seen a considerable number of such cases, and we believe they will be more frequent when schools are generally established in Asylums, and books are plentifully and judiciously supplied to patients.

Under the head of improved, are classed some who were nearly well when they left us, and who have since recovered. Others were merely improved in their habits and manners. They had become less violent, and so far regained control over themselves as to willingly submit to the advice of their friends, and therefore are enabled to live at home, though they are still decidedly insane and probably will ever remain so.



Insanity is a disease liable to recur, though not more so than many other diseases, in fact less so than rheumatism and some other affections. Thus we find that while many have no recurrence of insanity during a long life, others are attacked after intervals ranging from a few months to twelve or fifteen years.

Of the 275 patients received during the year, *thirteen* were patients here the year previous and discharged, nine recovered and four improved. Those discharged recovered, remained well for different periods, varying from five to nine months, during which time they were able to attend to their usual business. Four of the number have recovered since their return to us and been discharged. Of the 211 discharged this year only *one* has been discharged twice ; the first time as unimproved, having been in the Asylum but a few days. After remaining at home a short time the patient was returned to the Asylum, recovered, and was again discharged.

The deaths have been from the following causes.  
From Marasmus or general debility, *seven*. Apoplexy and sudden effusion of serum in the brain, *three*. Consumption, *two*, and *one* from each of the following diseases, Diarrhœa, Chronic Inflammation of the stomach, Bronchitis and Inflammation of the membranes of the brain.

TABLE 1.  
*Monthly Admissions for two years.*

MONTHS.	MEN.	WOMEN.	TOTAL.
December, .....	11	10	21
January, .....	21	22	43
February, .....	26	26	52
March, .....	23	16	39
April, .....	31	21	52
May, .....	45	28	73
June, .....	18	30	48
July, .....	25	29	54
August, .....	17	20	37
September, .....	21	26	47
October, .....	20	17	37
November, .....	22	26	48
Total, .....	280	271	551

erto been able to receive *all the insane poor* chargeable to counties and towns, that have applied for admission. We also have received many who are supported by their friends, though some such we have been obliged to refuse in consequence of the Asylum being full at the time of application.

So numerous are the recoveries and discharges, that we anticipate being able to receive a large number during the coming year; and hope and expect to be able to accommodate all the insane poor that are sent to us. We shall make great efforts to do so, by filling to an inconvenient, and even improper extent, if long continued, every part of the present structure, anticipating more extensive accommodations in a short time, by the completion of the additions now erecting.

TABLE 3.

*Ages when insanity commenced.*

Under 20 years of age, .....	82
From 20 to 25 years of age,.....	120
“ 25 “ 30 .....	95
“ 30 “ 35 .....	58
“ 35 “ 40 .....	77
“ 40 “ 45 .....	38
“ 45 “ 50 .....	30
“ 50 “ 55 .....	17
“ 55 “ 60 .....	16
“ 60 “ 65 .....	12
“ 65 “ 70 .....	4
“ 70 “ 75 .....	2
	<hr/>
	551
	<hr/>

TABLE 4.

*Ages of the patients when admitted into the Asylum.*

Under 20 years of age, .....	39
From 20 to 25 years of age,.....	99
“ 25 “ 30 .....	99
“ 30 “ 35 .....	78
“ 35 “ 40 .....	75
	<hr/>
Carried forward,.....	



Brought forward, .....	
From 40 to 45 years of age, .....	58
“ 45 “ 50 .....	34
“ 50 “ 55 .....	29
“ 55 “ 60 .....	18
“ 60 “ 65 .....	11
“ 65 “ 70 .....	8
“ 70 “ 75 .....	1
“ 75 “ 80 .....	1
“ 80 “ 85 .....	1
	<hr/>
	551
	<hr/>

TABLE 5.

*Occupations.*

	Men.
Farmers, .....	116
Laborers, .....	40
Merchants, .....	20
Scholars, .....	16
Clerks, .....	13
Shoemakers, .....	11
Joiners, .....	10
Attorneys, .....	6
Physicians, .....	6
Teachers, .....	5
Sadlers, .....	4
Clergymen, .....	3
School boys, .....	3
Clothiers, .....	2
Coopers, .....	2
Carriage makers, .....	2
Stone cutters, .....	2
Blacksmiths, .....	2
Butcher, .....	1
Surveyor, .....	1
Gunsmith, .....	1
	<hr/>
Carried forward, .....	

Brought forward, .....	
Tobacconist .....	1
Painter, .....	1
Speculator, .....	1
Barber, .....	1
Cabinet maker, .....	1
Moulder in furnace, .....	1
Editor and bookseller, .....	1
Manufacturer, .....	1
Baker, .....	1
Glass cutter, .....	1
Innkeeper, .....	1
Boatman, .....	1
Hatter, .....	1
Engraver, .....	1
	<hr/>
	280
	<hr/>

	Women.
House work, .....	225
School girls, .....	17
Tailoresses, .....	11
Milliners, .....	7
Instructresses, .....	7
Mantaumakers, .....	3
Factory girl, .....	1
	<hr/>
	271
	<hr/>

TABLE 6.

*Civil Condition.*

Married, .....	270
Single, .....	255
Widows, .....	17
Widowers, .....	9
	<hr/>
	551
	<hr/>

We continue to receive more married than single persons, while most of the Asylums in this country receive more single than married. We do not know the cause of this difference.

TABLE 7.

*Places of Nativity.*

State of New-York,.....	382
Ireland, .....	34
Connecticut, .....	32
Massachusetts,.....	28
England, .....	14
Vermont,.....	12
New- Hampshire, .....	10
Canada,.....	9
Scotland,.....	6
Rhode Island,.....	6
Wales,.....	3
Germany, .....	3
Maine,.....	3
New-Jersey,.....	3
France, .....	3
South Carolina, .....	1
Pennsylvania,.....	1
Denmark, .....	1
	<hr/>
	551
	<hr/>



TABLE 8.

SUPPOSED CAUSES.	Men.	Women.	Total.
Ill health, .....	38	66	104
Unknown, .....	45	44	89
Religious anxiety, .....	38	39	77
Doubtful, .....	23	17	40
Puerperal, .....	--	30	30
Loss of property, .....	22	6	28
Excessive study, .....	21	4	25
Intemperance, .....	16	2	18
Death of Kindred, .....	6	11	17
"Millerism," .....	8	5	13
Disappointment in love, .....	9	4	13
Perplexity of business, .....	9	3	12
Fright, .....	5	4	9
Blows on the head, .....	6	2	8
Epilepsy, .....	4	3	7
Abuse of husband, .....	--	7	7
Jealousy, .....	2	4	6
Political excitement, .....	5	--	5
Disappointed ambition, .....	4	--	4
Bad conduct of children, .....	--	2	2
Seduction, .....	--	3	3
Malformation of head, .....	3	1	4
Masturbation, .....	3	1	4
Remorse, .....	--	3	3
Infidelity of wife, .....	2	--	2
Illness of friends, .....	--	2	2
Anxiety about absent friend, .....	--	2	2
Going into cold water, .....	1	--	1
"Fourrierism," .....	1	--	1
Sedentary life, .....	1	--	1
Preaching 16 days and nights, .....	1	--	1
Study of Phrenology, .....	1	--	1
Burn of head, .....	1	--	1
Anticipation of wealth, .....	--	1	1
Seclusion from society, .....	--	1	1
Murder of son, .....	--	1	1
Neuralgia, .....	1	--	1
Excessive labor, .....	1	--	1
Inhaling carbonic acid gas, .....	1	--	1
Exposure to excessive heat, .....	1	--	1
Exposure to fumes of charcoal, .....	--	1	1
Excitement from sea voyage, .....	--	1	1
Opium eating, .....	--	1	1
Irregular decay of faculties from old age, .....	1	--	1
	280	271	551



The cause of insanity is often obscure. In some cases after the most patient investigation, we have not been able to determine it satisfactorily to our own minds. The foregoing table, therefore, must not be considered as accurate. Sometimes we have probably assigned only one of the remote causes, and in others that which appeared to excite the disease in those already predisposed to it.

We, however, dwelt upon this subject at such length in our last report, that we shall not treat of it in this ; neither shall we introduce into this any thing that does not relate to the management of the Asylum. Remarks in an annual report on the nature and probable causes of insanity—on the medical jurisprudence of the disease, and its medical treatment, prevention, &c., are, no doubt, often useful and interesting to many, though such subjects cannot be dwelt upon in such a document to an extent that their merits deserve. We, therefore, entirely omit them, and the more readily from the fact, that we have recently commenced issuing from this Asylum a Quarterly Journal of Insanity, in which we propose to embody, from time to time, our views in relation to these important and deeply interesting subjects.

Our principal object in this report will be to enable the people of this State, and especially all those who have friends at this Asylum, or are proposing to commit insane relatives to our care, to know in what manner such unfortunate persons are here treated.

We fear that many have erroneous views respecting the management of lunatic asylums. Some still believe that at such places the inmates are often cruelly treated, and that there is much relating to their management concealed from the public. It will be our object to do away this impression, so far as we are able, by briefly, yet distinctly stating the particulars relating to the management of the insane at this establishment ; and we undertake this the more cheerfully from the fact that no such charge has, to our knowledge, been brought against us.

From the wise arrangements made by law when the Asylum was organized by the Legislature, it is rendered quite improbable that cruelty or bad management should exist without detection.

In the first place, the Managers, five of whom live within a short distance of the Asylum, receive no pay for their services, and no one of them has the least pecuniary interest in the management of the

establishment. Their visits to the Asylum are frequent—not at appointed hours, but on the various days of the week, and at different hours of the day and evening, and always without any notice of their intended visit. They go through more or less of the establishment, often over every part of it, and see each patient. On looking at the records of their visits, we find that one or more of them have visited us *one hundred* different times, or about twice a week, during the last year. After they have passed through the establishment, they make a record of their visit, in a book kept for the purpose, of the condition of the house and patients, and of defects and improvements, &c.

*Secondly.* The resident officers, consisting of two Physicians, a Steward, and Matron, constantly reside in the Asylum, with their families, and have no other business whatever, but the care of the institution and its inmates. They have not, however, the least interest in the income arising from the board of patients, as their salaries are paid from the State Treasury; neither do they defray any part of the expenses. In fact they have nothing to do with the pay of patients, or the funds of the institution, which are managed wholly by the Treasurer and Managers.

They, however, direct the expenditures, and order whatever they deem necessary for the welfare of the patients; and as their only object—the only interested motive they can have, is the recovery of the patients, they of course direct whatever they deem necessary to effect this object. Hence they see that the patients are well supplied with good food and suitable clothing, that they have good beds and bedding, and that they are kindly treated by their attendants; and as the latter are hired and dismissed by the resident officers; they are at once discharged for cruelty, or conduct likely to be injurious to the insane.

Having thus alluded to the organization and management of the Asylum, so far as the managers and resident officers are interested, we proceed briefly to state, under different heads, every thing relating to the reception and treatment of patients, which we think will be desired by those who have relatives at this institution, or who have friends they wish to place here.

These subjects will be treated of under the following heads:

- 1st. On application for admission to the Asylum.
- 2d. Conditions of Admission.



3d. Preparation of patients for admission.

4th. Treatment of patients on admission and subsequently.

5th. Correspondence with friends and the discharge of patients.

### APPLICATION FOR ADMISSION.

As the Asylum is now full, and probably will continue to be, except from the discharges of patients, which are about twenty each month, it becomes very important that application should be made to the superintendent previous to bringing a patient to the Asylum, to learn whether there is a vacancy.

Such application should state the sex of the patient, and contain a brief history of the case ; also state whether the patient is quiet, violent, suicidal, filthy, epileptic, &c. It often happens that every room allotted to patients that are quiet, or to those that are violent, are occupied, while there is room for those of a different class. We shall endeavor to receive all that apply, but may sometimes have to delay admission a few days, or weeks, until vacancies occur.

Patients that are quiet may sometimes sleep in the halls, or several in the same room ; and, therefore, we can accommodate many of this class for a short time ; but it is wrong, and in fact impracticable, to crowd those that are violent, noisy, or filthy--each one must have a separate room.

### CONDITIONS OF ADMISSION.

A patient cannot commit himself to the Asylum. We mention this as, in several instances, patients themselves have applied for admission. Each individual admitted here as a patient, must be committed to our care either by the public authority or by friends.

The laws of the State relating to the confinement of the insane are contained in title Three, chapter Twenty, part First, of the Revised Statutes, and in an "An act to organize the State Lunatic Asylum, and more effectually to provide for the care, maintenance and recovery of the Insane," passed April 7, 1842.

According to these acts, the overseers of the poor of towns (in counties where the distinction between the town and county poor ex-



ists) the superintendents of the poor of counties, and the first judge of the county, or in his absence, any county judge of the degree of counsellor of the supreme court, may send patients to the Asylum. But the laws do not contemplate that each of these authorities should send patients of every class. The overseers and superintendents of the poor are to send the paupers, and also those that are dangerous and committed to their charge by justices of the peace. The first judge to send those that are indigent, but not paupers, who are supposed to be curable, and the justices of the peace to commit to the care of the overseers or superintendents of the poor, for transmission to the Asylum, "any person so far disordered in his senses as to endanger his own person, or the person or property of others, if permitted to go at large." Judges of the county to commit those who are in confinement under criminal charge who become insane, and those acquitted of crime on the ground of insanity.

The superintendents of the poor of counties have the right to send to the Asylum, provided it is not full, any insane person in their charge, without instituting any proceedings to prove the insanity, provided the insanity commenced previous to the passage of the act to organize the Asylum, passed April 7th, 1842.

Since the passage of that act, they are required to send to the State Lunatic Asylum, or to such public or private asylum as may be approved of by a standing order or resolution of the supervisors of the county, within ten days, every case of lunacy committed to their care and provided for by title Three, chapter Twenty, part First, of the Revised Statutes.

But, in all such cases, the act of 7th of April, 1842, directs as follows: "In every case of 'confinement' under the statute, title Three, aforesaid, whether of a pauper or not, after the passage of this act, neither justices', superintendents, or overseers of the poor, shall order or 'approve' of such confinement, without having the evidence of two reputable physicians, under oath, as to the alleged fact of insanity, and such testimony shall be reduced to writing and filed, with a brief report of all the other proofs, facts, and proceedings in the case, in the office of the county clerk, and said clerk shall file said papers, and register, with date, the names and residence of the lunatic and officers severally, in tabular form, in the book of miscellaneous records kept in said office; and the certificate of said clerk and

seal of the court, verifying such facts, shall warrant such lunatic's admission into the Asylum."

Justices of the peace are required, also, to direct the apprehension and confinement of any person so furiously mad as to endanger himself, or the person and property of others, if permitted to go at large, but they are to institute the same inquiry and proceedings as above cited. They should, also, direct their warrant for the apprehension and confinement of said lunatic to the overseers of the town, or superintendents of the county, whose duty it is to see that he is placed in a lunatic asylum within ten days.

Section 26th of the act of 7th April, authorizes the first judge of the county as follows: "When a person in indigent circumstances, not a pauper, becomes insane, application may be made in his behalf to the first judge of the county where he resides; and said judge shall call two respectable physicians and other credible witnesses, and fully investigate the facts of the case, and either with or without the verdict of a jury, at his discretion, as to the question of insanity, shall decide the case as to his indigence. And if the judge certifies that satisfactory proof has been adduced, showing him insane, and his estate is insufficient to support him and his family, (or if he has no family, himself,) under the visitation of insanity, on his certificate, authenticated by the county clerk and seal of the county courts, he shall be admitted into the Asylum and supported there at the expense of said county, until he shall be restored to soundness of mind, if effected in two years. The judge, in such case, shall have requisite power to compel the attendance of witnesses and jurors, and shall file the certificate of the physicians, taken under oath, and other papers, with a report of his proceedings and decisions, with the clerk of the county, and report the facts to the supervisors, whose duty it shall be, at their next annual meeting, to raise the money requisite to meet the expenses of support accordingly."

Insane patients, supported by themselves or friends, are admitted into the Asylum when there are vacancies. The law requiring the testimony of two physicians, as to the fact of insanity in such cases, was repealed during the last session of the Legislature. It was often troublesome and expensive in some towns to obtain this kind of evidence, even in the most unquestionable cases, and as the managers and resident officers of the Asylum have no interest whatever in re-



taining patients, and would of course discharge those found not to be insane, it was deemed advisable and safe to refer the question of insanity to them.

But when a patient is thus supported at the Asylum, a bond for the payment of the semi-annual bill of expenses is required, and for the removal of the patient when requested by the managers. Consequently, those who send friends to the institution should come prepared to give such a bond, and, if strangers, bring evidence of their responsibility.

### PREPARATION OF PATIENTS FOR ADMISSION.

There are few serious diseases in which early treatment is more essential for recovery than insanity—and few in which it is more likely to be successful. A large majority of the recent cases of this disease recover when subjected to early and judicious treatment, and removal from home and from the place where the exciting causes of the disease tend to perpetuate it.

It is the neglect of this early treatment that fills the alms-houses and the asylums of the country with the incurable insane. We, therefore, earnestly entreat those who have the guardianship of the insane, not to neglect early treatment. Of the 551 patients received into this institution, 295 had been deranged more than one year, when they came to the Asylum, and 103 of this number had been deranged upwards of five years—*twelve* above twenty years. Of the 260 now in the Asylum, 116 had been deranged from one to two years when they came under our care, while 144 had been deranged from two to twenty years. We consider, therefore, that more than one-half of the patients in the institution are incurable. Some of the recent cases probably will not recover, while a few of the old cases probably will. We presume, however, that in no other institution for the insane in this country, is the proportion of recent and curable cases greater than in this, and in most it is much less. Probably more than *three quarters* of all the patients in the lunatic asylums in the United States are incurable, and most of them were so from neglect of early and proper treatment before they were sent to any asylum. Still asylums are necessary for the incurable as well as the curable. The incurable insane should be placed in good asylums for their comfort and safety. The insane require peculiar care. In a good regulated



asylum they enjoy much ; while out of one, exposed to innumerable annoyances that would not affect the sane, they pass much of their time in indescribable wretchedness. We hope, and we believe, that the time is not far distant when *all* the insane in the more enlightened countries, and particularly in this, will be placed in asylums especially provided for them.

Violent attacks of mania are much more frequently cured than cases that commence with but trifling symptoms of derangement—with only slight delusions. The reason is, that the latter class of patients are so little troublesome, that they are neglected until the disease has continued several years, and they become incurable.

But there is an opposite extreme to be avoided. Some deranged persons are very improperly hastened from home before the disease is fully developed. We recently had a patient brought to us from Canada, laboring under inflammation of the membranes of the brain. He was suffering from severe disease of the brain, and as a consequence was delirious. He was not able to sit up after his arrival, and soon died.

In all cases of doubt, and in all cases of recent insanity, a judicious physician should be consulted respecting the propriety of removing the patient. But after a sufficient time has elapsed to render it evident that the case is one of insanity, unaccompanied with acute disease, then no time should be lost in adopting the remedial measures to which we have referred. Still, a patient should not be sent to an asylum, until the relatives and friends have fully satisfied themselves that he will there be treated kindly and judiciously. This is due both to the patient and to the institution.

But when they have thus satisfied themselves, they should give the control of the patients into the hands of those who have assumed the responsibilities of the case, and not throw any obstacles in the way of recovery, by frequent visits, or requesting friends and neighbors to visit the Asylum for the purpose of seeing the patient, unless this course has been advised by those to whose care he is confided.

Most insane persons are injured by visits of their relatives and acquaintances. Their aversions, suspicions, and troubles, are often vividly recalled to their minds by such visits, and thus they are rendered much worse ; or else the most painful feelings arise when their

friends leave them ; they become melancholy and sleepless, and in consequence often relapse from a state of advanced recovery.

In some instances the visits of friends are very useful, but the proper time for this kind of intercourse is soonest known to the physician who has charge of the case, and who will gladly avail himself of this as well as of every other means of benefitting and curing the patient.

We always write to the guardians or relatives of those under our care, if they become materially better or worse, and endeavor to keep their friends apprised of every essential change in their condition, and we cheerfully and immediately answer all letters of inquiry respecting them. In this way the anxious friends of our patients can always ascertain their condition, and their prospects of recovery without endangering them.

In some instances we deem it useful for patients to receive letters from home, and in such cases we apprise their friends and request them to write, and also the patients to answer them.

### CLOTHING.

A good supply of clothing should always be forwarded with the patient. Each man should be provided with, at least, two new shirts, a new and substantial coat, vest and pantaloons of strong woollen cloth, a pair of mittens or gloves, two pairs of woollen stockings, a black stock or cravat, a good hat or cap, and a pair of new shoes or boots, together with a comfortable outside garment.

Each woman, in addition to the same quantity of under garments, shoes and stockings, should have a flannel petticoat, and two good dresses, and also a cloak or other outside garment. In case the patient is so much excited as not to admit of being thus clothed, other clothing that can be kept on, that is comfortable, and in sufficient quantity, with a change thereof, may be substituted. It is very desirable that extra and better garments should be sent with those accustomed to them, that when they become better, and when they walk or ride out, attend religious worship, &c., their self respect may be preserved. This is important and should not be neglected. *In all cases the patient's best clothing should be sent.* It will be marked



and carefully preserved, and only used when deemed useful for the purposes mentioned.

### CLEANLINESS.

Great attention should be paid to the cleanliness of patients before they are brought to the Asylum. They should be known to be free from vermin and from the itch. In one instance a patient was brought to us whose clothes were infested with lice. In this case, and we should do the same if another should occur, which we trust will not, we immediately burned all the apparel the patient brought, and supplied him with new.

A written history of the case should be transmitted with the patient, and when convenient, it is also desirable that some one, well acquainted with the patient, should accompany him or her, from whom minute but often essential particulars may be learned.

Among the particulars which we wish to learn respecting a patient, are the following : Name, residence, age, place of birth, occupation, married or single, how long insane, probable cause of the disease. If any previous attacks. If other members of the family have been insane. If he is disposed to suicide. Disposition to eat and sleep, to make noise, to strike, break things, destroy clothing. What diseases he has been subject to. What peculiarities of mind, temper or habits, previous to the attack of insanity. What remedial treatment has been adopted since the attack, present state of health, &c. Every thing likely to throw any light upon the cause of the disease, or to guide us in the care and treatment of the case, should be ascertained and be communicated to us. If the patient has any favorite pursuit, or is particularly fond of accumulating property, or of certain amusements, of music, of reading, attending religious meetings, or has any *hobbies*, these should be mentioned.

It will also be well, in most cases, to explain to the patient, previous to his removal from home to the Asylum, the necessity of adopting this course. In some few cases, perhaps, the opposition and excitement would be so great, that this may be dispensed with until after arrival at the Asylum ; but we never permit the friends of a patient to leave until they have stated to him their object in bringing him to the Asylum, and also explained to him the character of the institution. This we have done even in the most maniacal and demented cases.



Sometimes the friends improperly deceive patients with respect to the character of the Asylum — it is represented to some as a hotel or common boarding house, or a place of constant amusement, and which they can leave when they please — and where they can have every thing they call for — can ride and walk out when they choose, &c. This is wrong, and likely to embarrass us, and to prove injurious to the patient. We endeavor to make our establishment as comfortable as any boarding house, and to afford to our patients all the amusements and out door exercises and rides and walks that are likely to be serviceable to them. But to many, especially to those recently attacked, much exercise is injurious. They require seclusion and quiet — medical treatment and regulated diet. We are therefore desirous that patients should be informed that this is a place to which they are sent for the restoration of their health, and where a course will be adopted intended to accomplish this object. That here they will be supplied with every thing likely to contribute to their welfare, and that under all circumstances they will be kindly treated, and as soon as they recover will return to their friends.

### TREATMENT OF PATIENTS ON ADMISSION AND SUBSEQUENTLY.

When a patient arrives at the Asylum, he is introduced to the superintendent and other resident officers who may be present, and by whom he is kindly addressed and welcomed. If he is not already aware of the nature of the institution, and the object of his friends in bringing him to it, these are now made known to him by those who have accompanied him to the Asylum, and we assure him that his situation here will be made comfortable—that he will be kindly treated, and, we hope, soon cured, when he will return to his friends and home.

After this he is waited upon into the apartments which he will probably occupy, accompanied by his friends, and introduced to his attendants and fellow boarders, care being taken to make him understand that the Asylum is a place for invalids. He is shown the arrangements for washing, bathing, and exercising. He also sees his dining-room, bed-room, and the room where his clothing and trunks are deposited, and the reading and school room. His friends then bid him farewell and leave him to the care of his attendants.

We then make a record of his admission, and write out a history of his case in the case-book of the Asylum, so far as we are able to learn it from the documents sent us, and from those who accompany the patient. We also make a record of the name and residence of the person with whom we are to correspond respecting the patient. We then examine the clothing and make a memorandum, in a book kept for the purpose, of every article belonging to him that is brought to the Asylum.

All dangerous weapons, as knives, razors, and scissors, are taken from the patient ; also, tobacco, snuff, and money. Tobacco and snuff are usually injurious to patients, as they are often disposed to use them in excessive quantities when they have a large supply. We therefore deem it necessary either to withhold them entirely, or to supply them from time to time with such limited quantities as we think will not injure them. The use of snuff we very rarely or never permit, neither do we allow any smoking. To a few, long accustomed to chewing tobacco, and especially some who labor, we allow a little. Money can rarely be of use to patients when here, as we do not feel at liberty to permit them to spend it as they choose, and if left with them, they often lose it, or it is taken from them by some of the other patients. If, therefore, they are found to have money in their possession, we usually take it from them, seal it up, and keep it until they leave us ; and whenever they wish to purchase any thing that we deem proper for them to have, we supply them with money and charge it to them. We therefore prefer that patients should not bring money with them.

Within a day or two after the admission of a patient, and often the same day, he has a warm bath, and has his hair properly cut if it needs it, and his apparel put in good order. Patients are not allowed to shave themselves. We have in each hall for the men a *barber's room*, fitted up with many conveniences, where each man in the hall is shaved at least twice a week ; a few are shaved more frequently.

The bodily health of the patient is early attended to. Not unfrequently a laxative is immediately required, but we usually wait a few days, until we satisfy ourselves by repeated inquiries and examinations respecting the proper course of remedial treatment, before adopting any. Often we find that medical treatment is not needed. The patient requiring only removal from the exciting causes of his disease,



and his mind diverted from past contemplations, together with regular diet and sleep, to effect his recovery.

After a few days, when we have become acquainted with the patient, we usually allow him to join in the various exercises and amusements of the Asylum. He goes out to walk or to ride, and to the chapel on the Sabbath, and also attends school if he wishes; and is supplied with newspapers and books. If he chooses to labor, and it is thought not to be injurious to him, he is permitted to do so. He takes his meals regularly three times a day with those who occupy the same hall with himself, at a well furnished table, and at nine o'clock in the evening retires to rest.

### AMUSEMENTS.

Among the amusements afforded to our patients we think that labor is the best, and it is most generally preferred. Our men labor on the farm and in the garden, and in the workshops, and assist us in various kinds of work about the establishment. Some of them work in the house, in the dining-rooms, arranging the tables for meals, sweeping the rooms and halls, and in cleaning and keeping their apartments in good order. Others are often employed to write; and I am under great obligation to several for assistance in this respect. For example, in drawing up this report four different patients have been employed as amanuenses.

The women knit stockings and make clothing for the patients, and bedding for the Asylum. They also assist in the dining-room, and in keeping their apartments neat and in good order. Most of the ironing for the patients is performed by them. None, however, are employed in the kitchen and wash-room.

Last year a *fair* was proposed, and the women engaged in it with such alacrity and spirit that in a short time they made a great number of curious and beautiful articles, and in January, on the anniversary of the opening of the Asylum, the fair was held. From the sales at that time, and of articles made by the women, and since sold, we realized a sufficient sum to purchase a considerable addition to our library, some musical instruments, a ticket of admission for all the inmates of the Asylum to the museum in Utica for one year; and also to erect a handsome *green-house*. The green-house we find to be an



admirable appendage to our establishment. Already we have in it four hundred flourishing plants, and it is the daily resort in winter of many of the patients.

But the greatest good which resulted from the fair was the pleasure which the devising and making of various articles afforded to many of the patients, and we hesitate not to say that to several it was the means of restoration. Preparations for another are now in progress, with the like beneficial effects upon those engaged in it. We are confident that more good has resulted to our patients from their mental and bodily labor connected with these fairs, than from all the various games and plays they have ever resorted to, and they have had recourse to many, such as battledoor, historical games, Doct. Busby, Mansion of Happiness, lottery games, Pickwick cards, &c. &c.

During the summer our men constructed a good road through the farm, and the beautiful grove of fifteen acres that is upon it, in the middle of which they built a small cottage. This is furnished with seats, a few pictures and papers, and affords a pleasant resort for patients in the summer, each attendant having a key that unlocks it. We have many other amusements for our patients, such as nine pins, cards, checkers, chess, and other plays and games just alluded to, but we find, with perhaps the exception of cards and nine pins, that they do not afford so much enjoyment to the patients as some kinds of labor.

We have a good supply of musical instruments ; and to many, music is not only gratifying for the time, but soothing and useful. To the music of the piano the women often dance by themselves, but we do not have any balls, and very rarely any parties of amusement that bring the sexes together.

We have a library of between 200 and 300 volumes, to which such of the patients as wish to read have access. We also have a large supply of newspapers, amounting to 70 a week. We are also supplied with two monthly magazines and numerous pamphlets, and single numbers of newspapers are sent to us for the use of the patients, and which are distributed to them. Several patients also receive papers regularly from their friends.

## DIET AND MEALS.

The time for breakfast varies according to the season of the year. In the winter it is at half past seven ; in the spring and fall at seven, and at half past six in the summer. Dinner is at half past twelve, and tea at six o'clock the entire year. Our tables are furnished with handsome crockery, and present an appearance in no respect different from those in good boarding houses. We also provide for the use of the whole household the best qualities of meats, fish, flour, tea, coffee, vegetables, &c. and these are cooked and furnished to our patients as if they were boarders and not patients. We never limit the quantity of food for the patients, except in case of sickness, or occasionally, when a patient is disposed to eat so much as to injure him. We have also a large supply of milk, which is abundantly furnished to the patients. We have but one kitchen, and the food for all the inmates of the Asylum, including the resident officers and their families, is cooked at the same time, and is of the same quality. It is also supplied alike to the different apartments of the house.

To give some idea of the amount consumed by our whole household, consisting of about 320 persons, we add the following table of the weekly consumption of the various articles. It is for the week ending October last, and was not made with reference to publication, but for the guidance of the steward in his purchases. Some weeks would probably present a different result in several of the articles.

1750 pounds of bread.		
195	do	crackers.
196	do	flour.
240	do	corned beef.
230	do	beef steak.
175	do	roast beef.
171	do	mutton.
50	do	salt pork.
50	do	codfish.
56	do	mackerel.
273	do	sugar.
14	do	tea.
35	do	coffee.
94	do	cheese.
370	do	butter.



30	pounds of	rice.
4 $\frac{1}{2}$	galls. of	molasses.
6	doz.	eggs.
3	bushels	apples.
20	do	potatoes.
3	do	beets.
1	do	onions.
1	do	carrots.
36	heads	cabbage.

The insane require full as much food as the sane, and we think rather more ; many of them have been reduced by sickness, or by their real or imaginary troubles, before they came under our care, and when they begin to recover eat very heartily. They also increase in flesh most generally when recovering. The total increase in weight of the 132 discharged recovered the last year was 1565 pounds.

### SCHOOLS.

These have been continued, and our confidence in their utility, and even their necessity for the improvement of many of the insane, has increased. We find that patients who have recovered here, look back to their attendance in school as the greatest enjoyment they had, and often allude to it and to the advantages they derived from it, in their letters. We believe that schools in lunatic asylums may be rendered still more useful than even we have found them, by having more perfect arrangements as regards school rooms and school apparatus, than we have yet had.

A manual or book of instruction, containing short precepts and maxims for the guidance of the insane, respecting the preservation of health—the government of the passions and control of the feelings, portions of which they would commit to memory, we believe would do much good, and we hope to be able to prepare such, in the course of another year. Those who have been once insane are so liable to a recurrence of insanity, that we feel as if we had not done a patient all the good we ought by curing him of one attack, but that we should endeavor so to instruct him that he may prevent another. We have great confidence, in many instances, of *man's power over himself to prevent and control insanity*. But to accomplish this many need to be enlightened.

## RELIGIOUS WORSHIP.

Sunday is a day of rest and quiet at the Asylum. The buildings and grounds are not exhibited to visitors on this day. No more work is done than is necessary, and no amusements allowed. The patients are dressed in their best clothes, and those who wish and are able, attend religious services in the chapel.

The Rev. James Nichols having accepted a call to preach elsewhere the last spring, the Rev. Gaius M. Blodgett has since then officiated as chaplain. His services have been well received, and we believe they have been highly useful to our household. We consider the religious exercises of our chapel on the Sabbath, necessary to the good order and welfare of the establishment—an essential part of the moral treatment of the insane.

We have good singing. Usually a majority of those who conduct this delightful part of religious worship are patients. Sunday evening is set apart for improvement in singing.

Recently we have commenced holding a *monthly meeting* of the officers, attendants and assistants who can be spared from their duties. The time selected is the evening of the third Monday of each month. Patients do not attend. At these meetings we have prayers and singing, and sometimes a short discourse from the chaplain, and at others, remarks from the superintendent, relating to the proper management of the insane and of the Asylum, or on improvements that are making elsewhere, or that may here be made. The whole exercises are intended not only to afford instruction, but to awaken a deep interest in the welfare of all the insane.

We anticipate much good to ourselves from these monthly meetings, and hope to be joined by other institutions for the insane, and that thus once a month, we may unitedly ascribe thanks to the Father of all mercies for his protecting care of these institutions, and to implore the continuance of his guidance and blessing.

Such is a brief account of the reception and treatment, and the labors and amusements, of full eight out of every ten patients that we admit.



Many who are at home rude and violent, and not disposed to submit to the guidance or control of others — here immediately conduct with propriety and conform to our regulations. We think the example of others of great service in producing such a result. Most patients, readily adopt the course of conduct which they see pursued by all those with whom they are constantly associated. Often we receive patients whom their friends say will not eat with others, who here never make any objection, but go to the table and eat regularly with others, and even without being directed.

But it must be evident to all, that some patients cannot be thus treated — that some are too violently deranged to comply voluntarily with any regulations, and we therefore proceed to describe our manner of treating this class, premising that it is a much smaller class in an Asylum than most persons suppose, rarely amounting to ten in an hundred. It is also a very variable class, some patients continuing in this condition but a few days after reception.

### TREATMENT OF VIOLENT MANIACS.

Many of this class are brought to us in chains, or with their limbs confined by strong cords. These are in all cases immediately removed, and the patient is kindly addressed and assured that he is among friends who will use him well. He is also told the truth in the presence of those who accompany him, respecting the Asylum and the object for which he is brought to it. He is then taken to the apartment he is to occupy, and permitted to have his liberty, but his attendants are directed to watch him carefully, and if he is disposed to be violent, to strike, to break the windows or the furniture, to put him into his room.

Most of the rooms for patients, are of the same size, none smaller than ten by nine feet ; but those for the violent class are in some respects more comfortable ; they are well ceiled with boards, handsomely painted, which makes them warmer, safer, and better for patients than those with plastered walls. The upper part of the door opening into the hall from each room, is open lattice work, so that the patient can look into the hall and be constantly seen from it. The window which lights each room, is well secured by a strong lattice shutter, so open that the patient can look into the yard or garden. If he is disposed

to tear his bed or bedding, they are removed from the room during the day; and if we find from our own observation, that he tears his clothes, and that no persuasion or watchfulness on our part can prevent his doing so, we usually enclose his hands in leather muffs, or in mittens of leather or strong cloth, or apply soft leather or cloth wristbands so as to confine the hands.

These are the only methods of restraint we adopt with the most violent patients. We never in any case use ropes or chains, and dispense entirely with strait-jackets. We occasionally have a patient who would exhaust himself by walking, jumping, or standing up continually, that we fasten in a gentle manner to a chair or bed for a short time. But none of these methods of restraint are long continued without giving the patient an opportunity of showing that they may safely be dispensed with. We much prefer that a patient should occasionally break a pane of glass or tear some of his clothing, than to keep him constantly confined. We therefore give him frequent opportunities, and place before him inducements, to exercise self control.

As we have said, no part of the establishment is made so comfortable for patients as this, where the most violent are placed. We assign to this class a greater number of experienced and discreet attendants than to any other, some of whom remain constantly with the patients — and two of them sleep in the same apartment. The part of the building assigned to this class at the present time, is the end of the first or basement story of each wing, and which is of easy access. We have no detached or out-buildings for patients, nor do we intend to have, as we deem it important for the welfare of the insane, especially for those who are violently deranged, that they should be placed where they can be readily and frequently visited by the physicians, the matron and other officers of the establishment — both by night and by day. In the new building now erecting, larger accommodations, and in some respects more convenient, will be provided for this class, and such arrangements adopted as to prevent those that are very noisy from disturbing other patients.

The food for those that are violent and much excited, is carefully adapted to their condition, and supplied to them in such a manner that no injury will be likely to arise to themselves or others. The utmost care is taken to insure the comfort of this class of patients, by properly ventilating and warming their apartments. Their beds, bedding



and clothing require and receive much attention. Some are disposed to destroy their bedding or to remove it from them, and thus liable to suffer from cold in the night.

Such patients give us much anxiety, and we resort to various methods to insure their comfort. To prevent their suffering from cold during the night, we find nothing better than a dress made of woollen blankets, open behind, and with the sleeves and legs extending below the hands and feet, and sewed up at the extremities. This garment, covering the whole body and fastened behind, will usually be kept on during the night, though in some cases, we have to enclose the hands in mittens. It effectually secures the patient against cold, especially of the feet, which is most difficult yet very essential to guard against during the night. During the day a few patients wear strong loose gowns, which in cold weather, for those that are feeble, are padded.

We never allow a patient to be punished. An attendant who is known to strike, or otherwise abuse a patient, is immediately dismissed, and this is well known to all. We sometimes, however, withhold some little favor, or refuse to comply with some of the wishes of the patient, intending it to operate as a punishment for misdemeanor, or more frequently, we promise some additional gratification, such as the privilege of attending religious services in the chapel, or visiting the museum, if he will control himself in certain particulars, such as refraining from hallooing, striking, injuring his clothing, &c. We rarely shower patients with cold water, except in warm weather, and when they request it for their comfort. We sometimes do not use it when we think it might be useful, for fear of its being considered a punishment, and thus do more harm than good. We more frequently apply cold water directly to the head, without wetting any other part of the body, and this we find very useful in cases of great excitement. But we never allow attendants to do this without an order from one of the physicians; and we do not permit a large quantity to be applied — a little is sufficient in cases where any is required. We find the warm bath, especially if long continued, with cold water gently applied to the head at the same time, often very effectual in quieting excited patients, and disposing them to sleep.

But as we have said, this is a very changeable class; often those whom we are obliged thus to treat, become better in a few days, and

are placed with those that are more quiet. To no one object are our efforts more constantly directed, than to diminish the number of this class, and to dispense with all kinds of restraining apparatus, although we most firmly believe, after much reflection and inquiry, and repeated attempts to entirely dispense with it, that some restraining apparatus such as we have mentioned, is not only essential for the comfort of patients, but in some instances preserves their lives.

For the most part, those who are brought here in a very excited state, and require the foregoing treatment, when they recover, feel grateful for the attention bestowed upon them when in this condition, and are sensible that they were kindly treated, and not only so, but appear to realize that by the course pursued, their lives were saved. They also lament the trouble they occasioned those who had the care of them. This is almost uniformly the case with a patient who becomes perfectly well before leaving the Asylum.

But some few who are subjected to any kind of restraint, even that of being shut up in a lunatic asylum, never appear to comprehend the necessity for it, and after they recover are apt to feel that they were in some respects abused. They seem but to recollect that they were often opposed, while they are unable to realize that they had any wishes not proper to have granted, or any habits that would be injurious for them to indulge. Patients who thus conduct belong to that class who most complain of having been abused at home, and we uniformly find that those who here mistake kindness for abuse, are disposed to relate to us long stories of the cruel treatment they received from their relatives and neighbors. But we are not inclined to credit their accounts, as we suppose them unable to comprehend the necessity of their being in any respect opposed, and incapable of putting any other construction on the conduct of their friends who are obliged to control them, than that of intentional cruelty.

Every one who has had much to do with the insane soon learns that by kind treatment and attention they are far more easily managed, and much less troublesome, than when they are neglected or in any manner abused. There is, therefore, every inducement for the attendants in an asylum to treat them kindly. To aid those employed in this institution, and to remind them of their duty to those committed to their care, we have the following rules, which are printed and kept in each hall, and which are strictly enforced.



## RULES FOR ATTENDANTS.

1. The attendants are to treat the inmates with respect and attention, greet them cheerfully with "good morning" or "good evening," and such other marks of good will and kindness as evince interest and sympathy. Under all circumstances be tender and affectionate; speak in a mild, persuasive tone of voice; never address a patient coarsely, by a nickname, nor by a christian name, nor by a surname, without the addition of "Mr., Mrs., or Miss."

2. A patient is ever to be soothed and calmed when irritated; encouraged and cheered when melancholy and depressed. They must never be pushed, collared, nor rudely handled. To induce them to move, gentle, persuasive measures will prevail in most cases; when these fail, tell the superintendent, or if he be absent, the assistant physician or steward.

3. If the attendant receive insult and abusive language, he must keep cool, forbear to recriminate, to scold, threaten, or dictate in the language of authority. *Violent hands are never to be laid upon a patient under any provocation. A blow is never to be returned, nor any other insult.* Sufficient force to prevent the patient's injuring himself or others, is always to be applied gently.

4. The attendant is never to apply any restraining apparatus, such as muff, mitts, &c., unless by order of a resident officer.

5. On rising in the morning, it is the duty of the attendants to see that each patient confided to his or her care is thoroughly washed, hair combed, clothes brushed, and cleaned if necessary, collars, wristbands and suspenders buttoned, and all parts of the dress properly adjusted and secured; boots and shoes cleaned and tied, and in fact that the whole dress be neat and in good repair. (All this should be re-looked to throughout the day, and especially before coming to meals or religious services, or going to ride or walk.) The patients' beds are then to be made, and the galleries, day-rooms, bathing-rooms, passages and stairs to be swept, and the whole premises put in complete order as soon as it can be done, so that a complete inspection may be had of the house by the superintendent, commencing at eight o'clock from April to September, both inclusive, and at nine the rest of the year. Previous to which time no patients are to leave the house to walk,

labor, or ride, without directions of the medical officer. By ten o'clock the morning work should be completed, and the house in order for visitors in every part.

6. One attendant must always be in each gallery with the patients, and he must not leave under any circumstances, but when relieved. The attendants must not retire to their rooms while the patients are in the hall. *This rule* must be observed in all the galleries.

7. At meals, one attendant must always be present to carve, to distribute food to those who are incompetent to do it for themselves, and to see that every one has a proper supply. He must be careful that no patient carry away a knife, fork, or other article from the table.

8. An attendant must never place in the hands of a patient, or leave where a patient can get, any razor, penknife, rope, cord, medicine, or any dangerous weapon or article. A constant watch of patients is to be kept in these respects; their beds frequently searched for such articles, and the knives and forks counted after each meal. An attendant must never deliver any letter or writing from or to a patient, without permission of the superintendent; nor ever retain in his or her possession, without such permission, any writing of a patient.

9. The attendants in each gallery are responsible for the safe-keeping of the patients therein, and must not leave them except in charge of some responsible person. There is an obvious impropriety in attendants sitting in their own rooms, engaged in reading or writing during hours of duty—*i. e.* from the time the patients get up in the morning until they retire at night. During this time they should be in their own rooms only long enough to adjust their own dress. All these hours, with this sole exception, should be devoted to the patients, endeavoring to keep them tidy and warm, to prevent improper conduct, bad postures, (such as lying on the floor, ground, &c.,) and to instruct, comfort, and amuse them by talking with them, reading to them, and the like.

10. Suicides and elopements are most frequent about meal times, and at the hour of religious services; therefore, the strictest watch is to be kept at these times. Attendants must always be stationed where they can see patients during meals or religious services, and see that no one passes out of the house, and that each one returns to his or her apartment. Attendants are to look, not merely to those under



their immediate charge, but, with constant watchfulness, over all the patients, they must endeavor to prevent any from eloping or wandering. The clothes of suicidal patients, and every dangerous article, should be removed from their rooms at night. Each attendant should always know where every one is of those committed to his or her charge.

11. When patients ride out, it is the duty of the driver of the carriage to see that they do not leave the carriage, nor communicate with persons casually met, nor deliver letters, packages, or messages, nor procure weapons, tobacco, or other articles. He is not to stop and do errands for himself or others, without permission of the superintendent. When patients walk out with an attendant, he shall keep them together, and observe the same prohibitions as the driver; he shall also particularly avoid going near dangerous places, as railroads, canals, precipices, rivers, wells, machinery, &c.

12. Attendants will go to the office for medicine half an hour before each meal, and see that the whole is given at the time directed, and that it is all swallowed. Each cup is marked with the patients name. Extreme care must be taken to avoid mistakes, and to prevent patients helping themselves to medicine; therefore, all cups, vials, boxes, &c., containing medicine, should be locked up; within an hour from the time of taking them from the office, the cups should be cleaned and returned to the office. In going for the cups and returning them, the attendant must not delay in the passage, nor hold any other conversation than to report to the superintendent or assistant physician, changes in the condition of the patients, which they are always to do immediately.

13. All damages by patients, and all their wants as to clothes and other articles necessary to put these rules in practice, are to be reported, *daily*, to the superintendent, steward, or matron. It will be no excuse for attendants that their rooms, beds and patients are not in ample order, to say *they have not what is necessary*; for their application for such articles should be unceasing until they get them.

14. The attendants must never ridicule the patients, nor mock or imitate them, nor do or say any thing to wound their feelings. If the patients engage in any controversy, or other improper or exciting topic of discourse, the attendant must, in the gentlest manner, interfere

and check it; should other means fail, one or two of the loudest talkers may be shut up for a short time, in their respective rooms, if the quiet and good order of the apartment can not otherwise be preserved; but in such cases one of the resident officers should be informed immediately. The conduct and conversation of patients must never be spoken of to visitors, nor reported by attendants when abroad.

15. Attendants must look particularly to the comfort of patients in their special charge, and visit them late at night and early in the morning. In speaking to patients of the officers, attendants should inculcate respect and confidence in their management, and carry into operation all directions and prescriptions, in the most ready and faithful manner.

16. *Every patient must be in the charge of some responsible individual at all times*, unless permitted to be at large by the superintendent. The person who takes a patient from one of the galleries, shall be accountable for his or her safe keeping until returned to the same, or entrusted by a resident officer to the care of another person.

17. No patient shall be permitted to go out of the building in which his or her room is situated, without the consent of a resident officer; and no *new* patient without an order of the superintendent.

18. Food is not to be carried to the rooms of the patients; nor is any one to be absent from the regular meals (excepting in case of sickness or high excitement) without permission of a resident officer.

We have thus endeavored to give a plain and intelligible account of our manner of treating patients, and believe, in so doing, we have done a good service to those who have friends here, or those they wish to place here. There is nothing in the management of such an establishment that should be concealed from the public, nor is there any thing whatever that we wish to conceal. But it must be evident to all that every part of an insane asylum ought not to be thrown open to visitors. Humanity and justice forbid it. The comfort and welfare of those patients that are easily excited imperiously demand seclusion and quiet. We, therefore, rarely admit ordinary visitors into the apartments allotted to such patients; though these are the apartments



which are most frequently visited by the officers of the house, and most carefully examined by the managers.

## CORRESPONDENCE AND DISCHARGE OF PATIENTS.

As we have mentioned, we make inquiry of those who accompany a patient to the Asylum, of the name and place of residence of the person with whom they wish us to correspond. But we do not write at stated periods, nor unless there is a material change in the condition of the patient, but we write immediately if he is sick, or if any thing occurs to give us anxiety about him, and which we think it essential for the friends to know. We, also, immediately answer all letters of inquiry respecting patients.

When the patient recovers, and is in a condition to be discharged from the Asylum, we write immediately to his guardians, or to those who assigned him to our care. Occasionally we permit patients who have recovered to return home alone, but from experience we have found that this is sometimes wrong. Many patients, especially those who have been much deranged, and who but partially remember how they conducted when first attacked, have some fears respecting the feelings of their friends towards them, and are often suspicious they will not be kindly welcomed at home. This, together with anxiety about baggage, fear of accidents, &c., makes them nervous and sleepless, and sometimes causes a relapse. We, therefore, prefer that some acquaintance should come for a patient, who can assure him of the attachment of his friends, and relieve him of all anxiety on the journey, and thus enable him to return home without any unnecessary apprehension.

## STOCK, FARM, GARDEN AND SHOPS.

We have fifteen cows, which afford us an abundant supply of milk. Five horses, two of which are kept for the use of the patients. We have at present twenty-eight hogs, and have just killed *nine*, which weighed 3,167 pounds.

Our farm proves to be a productive one, and is cultivated by the patients, and their attendants, with the assistance of one man whom we employ as a farmer, and another as a gardener, but who have also much other labor to perform, such as the care of the stock, milking,

teaming, &c. Among the productions of the farm and garden the last year are the following :—

50 tons of	hay.
200 bushels of	oats.
100 do	Indian corn.
26 do	peas.
36 do	beans.
375 do	beets.
200 do	onions.
100 do	carrots.
75 do	parsnips.
80 do	cucumbers.
60 do	summer squash.
3,400 heads of	lettuce.
2,400 do	cabbage.
700 do	celery.
200 bunches of	radishes.
6 loads of	pumpkins.
8 do	winter squash.

Of the tomatoes and turnips and some other articles which we raised, we kept no account. We planted sufficient potatoes to produce, in an ordinary season, fifteen hundred bushels, but owing to disease, which generally affected potatoes in this region, we did not realize more than half that quantity.

We have a large shop for joiners, and another for shoemakers and mattress-making, in which more or less of our patients are employed.

#### ATTENDANTS AND ASSISTANTS.

We have in the employ of the Asylum, usually, about fifty persons, including a watchman and watchwoman, two teachers, joiner, shoemaker, dress-makers, and all those engaged in cooking, baking, washing, and the attendants who have the immediate care of patients. The number of these latter at present is twenty-four, or about one to ten patients, though to some classes of patients we assign a less, and to others a larger number. We pay our men from ten to fourteen dollars a month, with the exception of the joiner, who has seventeen. To our women from \$1.25 to \$2.00 a week, most of them one dollar



and fifty cents a week. All thus employed reside constantly at the Asylum.

We have, from the first organization of the Asylum, taken much pains to procure good attendants and assistants, and we believe that we have been successful. Those in our employ belong to that highly respectable class of persons in this community, who, to a good common education, have joined good principles and habits—who are industrious, temperate and economical. None other do we intend to keep in our employ. Those who are frivolous, careless and unsteady—fond of visiting and parties of amusement, and thus disposed to squander their earnings, or who are ill-tempered and quarrelsome, finding no congenial spirits here, soon become dissatisfied and leave us, or we discharge them. Most of those in our employ have been with us a long time, and we have every reason to be satisfied with their conduct, and grateful to them for the fidelity and zeal with which they have discharged their responsible duties.

### CONCLUSION.

In concluding this report I wish to express my own feelings of obligation to the managers of the Asylum, and to those who have been associated with me in the care of the institution.

To the managers I am indebted for uniform kindness and indulgence; and for constant efforts on their part to perfect the Asylum, and to render it a comfortable abode for patients, and for all those whose duties require them to reside at the institution.

Mr. and Mrs. Chatfield have continued to discharge the duties of steward and matron. The steward purchases supplies for the establishment, and is accountable for their safekeeping: the matron has the superintendence of the kitchen and laundry, sees to the neat appearance of the whole house, giving particular attention to that part of it assigned to the women. These officers are well qualified for their stations, and have discharged their arduous and responsible duties, with ability, and to the satisfaction of all.

The assistant physician, Dr. Buttolph, has rendered me every assistance in his power. I find in him a friend and counsellor, on whose discretion and devotedness to the welfare of the institution, I can confidently rely.

In behalf of the institution, I cheerfully render grateful acknowledgments to all those who have contributed, during the year, to increase the enjoyments of the inmates of this Asylum.

To some individuals from other States, and who are among the largest donors to similar institutions elsewhere, but who would not wish to be more particularly designated, we are under obligations for donations in money to increase our library. To several of the citizens of Utica and of this vicinity we are indebted for many flowering plants, and for garden-shrubbery to ornament our grounds and gardens, and for our green-house. We are particularly under obligations in this respect to B. S. Walcott, Esq. of N. Y. Mills, to Mrs. Henry Seymour, Hon. T. H. Hubbard, N. Devereux, A. Munson, C. Tracy, C. A. Mann and W. Hunt, Esquires, of Utica.

Our thanks are also due to many individuals for newspapers, magazines and pamphlets, from which our patients have derived both pleasure and profit. The following have been sent to us :

The Daily N. Y. Commercial Advertiser; Daily Albany Argus, two copies; Daily Albany Evening Journal; Daily Troy Budget; Daily Utica Gazette, two copies; Utica Observer; Utica Democrat; Liberty Press, Utica; Gospel Messenger, Utica; Jeffersonian, Wassertown; Troy Whig; Journal and Eagle, Poughkeepsie; Long-Island Farmer; Ontario Repository; Spirit of the Times, Batavia; Northern Journal, Lowville; Herkimer Journal; N. Y. Observer; N. Y. Evangelist; N. Y. Evening Post; Christian Advocate and Journal; Tribune, New-York; Freeman's Journal, N. Y.; Phrenological Journal, N. Y.; New World, N. Y.; Weekly Mirror, N. Y.; Olive Branch, Boston; Christian World, Boston; Hartford Times, Ct.; National Intelligencer, tri-weekly; Catholic Herald, Philadelphia; Graham's Magazine, Philadelphia; Columbian Magazine, N. Y.

For the most part the editors or proprietors of the foregoing papers have had the kindness to supply us gratuitously; though some have been furnished us by other individuals. To the Hon. Ezekiel Bacon and to Dr. Batchelder, of Utica, we are much indebted in this respect. They have unremittingly supplied us with some of our best papers. Several of the members of Congress from this State, have had the kindness to send us important documents, and will please accept our thanks.



Among no other class of persons are newspapers, pamphlets and interesting documents, sought for and read with more avidity, than by a large number of the patients at this Asylum; and we may truly add, that to none other do they afford more enjoyment. They do more than this—they lessen sorrow—dissipate gloomy feelings, and by withdrawing the mind from painful thoughts and delusions, contribute, in no small degree, to the restoration of many. We therefore feel under the most sincere obligations to all those who have thus contributed to the welfare of those committed to our care.

AMARIAH BRIGHAM.

NEW-YORK STATE LUNATIC ASYLUM, }  
*Utica, November 30th, 1844.* }

